


<b>FORM</b> <b>5</b> Rev 02/08	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table> Document Number:  400153604	DE	ET	OE	ES
DE	ET	OE	ES				
<b>DRILLING COMPLETION REPORT</b>							
This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.							
Completion Type <input checked="" type="checkbox"/> Final completion <input type="checkbox"/> Preliminary completion							
1. OGCC Operator Number:    100264 2. Name of Operator:    XTO ENERGY INC 3. Address:    382 CR 3100 City:    AZTEC    State:    NM    Zip:    87410		4. Contact Name:    Wanett McCauley Phone:    (505) 333-3630 Fax:    (505) 333-3284					
5. API Number    05-067-09840-00 7. Well Name:    UTE GOVT 8. Location:    QtrQtr:    NESW    Section:    36    Township:    33N    Range:    7W    Meridian:    N Footage at surface:    Distance:    1419    feet    Direction:    FSL    Distance:    1351    feet    Direction:    FWL As Drilled Latitude:    37.057160    As Drilled Longitude:    -107.564400		6. County:    LA PLATA Well Number:    101					
GPS Data: Data of Measurement:    04/27/2011    PDOP Reading:    1.6    GPS Instrument Operator's Name:    D. Fosdeck							
** If directional footage at Top of Prod. Zone    Dist.:    1919    feet. Direction:    FSL    Dist.:    2437    feet. Direction:    FWL Sec:    36    Twp:    33N    Rng:    7W							
** If directional footage at Bottom Hole    Dist.:    1978    feet. Direction:    FSL    Dist.:    2490    feet. Direction:    FWL Sec:    36    Twp:    33N    Rng:    7W							
9. Field Name:    IGNACIO BLANCO		10. Field Number:    38300					
11. Federal, Indian or State Lease Number:    I-22-IND-2759							
12. Spud Date: (when the 1st bit hit the dirt)    04/13/2011    13. Date TD:    04/17/2011    14. Date Casing Set or D&A:    04/17/2011							
15. Well Classification: <input type="checkbox"/> Dry <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Gas/Coalbed <input type="checkbox"/> Disposal <input type="checkbox"/> Stratigraphic <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Storage <input type="checkbox"/> Observation							
16. Total Depth    MD    3315    TVD**    2941		17 Plug Back Total Depth    MD    3263    TVD**    2890					
18. Elevations    GR    6412    KB    6424		One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.					
19. List Electric Logs Run: Compensated Photo Density/Compensated Dual Neutron Log Hole Volume Caliper Log Compact Triple Combo Quicklook Log Array Induction-RTAP Shallow Focused Electric Log							
20. Casing, Liner and Cement:							

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

### CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24#	0	425	320	0	425	VISU
1ST	7+7/8	5+1/2	17#	0	3,315	375	0	3,315	CBL

### ADDITIONAL CEMENT

Cement work date: \_\_\_\_\_

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

### FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
ANIMAS	904		<input type="checkbox"/>	<input type="checkbox"/>	
OJO ALAMO	1,362		<input type="checkbox"/>	<input type="checkbox"/>	
KIRTLAND	1,517		<input type="checkbox"/>	<input type="checkbox"/>	
FRUITLAND COAL	2,578		<input type="checkbox"/>	<input type="checkbox"/>	
PICTURED CLIFFS	3,197		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Wanett McCauley

Title: Reg Compliance Technician Date: 5/6/2011 Email: wanett\_mccauley@xtoenergy.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400162658	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400162664	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400153604	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400162695	LAS-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)